



Employee Education System
Department of Veterans Affairs

FACT SHEET for Veterans with Insurance and Co-Pay

VISN 12 GREAT LAKES HEALTH CARE SYSTEM

What is a Means Test? – A **Means Test** looks at your household income and assets. This includes your spouse and dependent children's income. It is used to decide if your income is higher than the income threshold established by the government.

PRIORITY GROUP 7 (CATEGORY C) VETERANS:

INCOME THRESHOLDS

- 1** You will be in Priority Group 7 (Category C) if you are non-service connected or 0% service connected and your household income is higher than the established income threshold.
- 2** You should update your Means Test every year, since income thresholds change from year to year.
- 3** You will be required to pay a co-payment for outpatient care. You will also have a co-payment, plus a daily charge for inpatient care.

	Outpatient	Pharmacy
Veteran with no dependents	\$24,305	\$9,556
Veteran with 1 dependent	\$29,169	\$12,516
Each additional dependent add	\$1,630	\$1,630

CO-PAYMENT CHARGES EFFECTIVE 12/6/01

Inpatient co-pay	\$812.00 + \$10.00 per day for up to 90 days of medically necessary care [each additional 90 days = \$406.00 + \$10.00 per day]	
Nursing home co-pay	\$812.00 + \$5.00 per day (<i>currently under review</i>) for up to 90 days of medically necessary care [each additional 90 days = \$812.00 + \$5.00 per day]	
Outpatient co-pay	Preventative care	no charge
	Primary care	\$15.00
	Specialty care	\$50.00
These charges are per day. If you have more than one type of visit in a single day, only the highest charge will count.		
Pharmacy co-pay	\$7.00 per 30 day prescription effective on 2/4/02	

Can VA Bill Medicare?

No, VA cannot bill Medicare.

If you are a Priority Group 7 (Category C) veteran and Medicare is your only insurance coverage, you will be responsible for the entire co-payment.



HOW DOES THE PRIORITY GROUP 7 (CATEGORY C) WORK?

- 1** *If you have reimbursable health insurance*, the insurance payment will be applied to your co-payment dollar for dollar.
- 2** If your insurance carrier does not reimburse the entire co-payment amount, **YOU WILL BE RESPONSIBLE FOR THE DIFFERENCE.**
- 3** *If you have NO reimbursable health insurance*, you must pay the full amount of the co-payment.
- 4** *If you have an HMO policy*, you are responsible for the entire co-payment. HMO's do not reimburse the VA unless the care you need is urgent or an emergency.
- 5** *If you have a Medigap policy*, the insurance carrier can pay up to 20% of the claim. This payment is subtracted from the co-payment bill up to the co-payment amount. There may be times when the insurance payment is less than the co-payment charge. Then you are responsible for the difference.

YOU MAY BE ELIGIBLE FOR A HARDSHIP OR A WAIVER

A **Hardship** may apply if you are a Priority Group 7 (Category C) veteran and you are not financially able to pay for inpatient and outpatient co-payments. Contact your facility Patient Administrative Representative.

A **Waiver** may apply if you have an outstanding balance on your account that you are unable to pay. This includes pharmacy. Contact your facility Patient Financial Representative.

VISN 12 Great Lakes Health Care System
says Thank You Veterans!